



DECLARATION FOR PATENT APPLICATION SOLE OR JOINT

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention titled:

IMPROVED INTERFERON POLYMER CONJUGATES

the specification of which is attached hereto.

I HEREBY STATE THAT I HAVE REVIEWED AND UNDERSTAND THE CONTENTS OF THE ABOVE-IDENTIFIED SPECIFICATION, INCLUDING THE CLAIMS.

I ACKNOWLEDGE THE DUTY TO DISCLOSE INFORMATION WHICH IS MATERIAL TO THE EXAMINATION OF THIS APPLICATION IN ACCORDANCE WITH TITLE 37, CODE OF FEDERAL REGULATIONS, §1.56(a).

I hereby claim foreign priority benefits u listed below and have also identified bel- application on which priority is claimed:	nder Title 35, United States Code, { ow any foreign application for pater	§119 of any foreign application(s) for it or inventor's certificate having a fil	patent or inventor's certificate ling date before that of the		
Prior Foreign Application(s)					
			Priority Claimed		
(Number)	(Country)	(Day/Month/Year Filed)	Yes No		
Hereby claim the benefit under 35 U	J.S.C. 119(3) of any United State	es provisional application(s) listed	d below:		
(Number)	(Country)	(Day/Month/Year Filed)	Yes No		
Thereby claim the benefit under Title 35. SUBJECT MATTER OF EACH OF THE APPLICATION IN THE MANNER PRO ACKNOWLEDGE THE DUTY TO DISC. REGULATIONS, §1.56(a) WHICH OCC. OR PCT INTERNATIONAL FILING DA	E CLAIMS OF THIS APPLICATION VIDED BY THE FIRST PARAGRA CLOSE MATERIAL INFOMATION CURRED BETWEEN THE FILING	N IS NOT DISCLOSED IN THE PRI APH OF TITLE 35, UNITED STATE N AS DEFINED IN TITLE 37. CODE	OR UNITED STATES ES CODE, §112, I E OF FEDERAL		
08/337,567	November 10, 1	1994 P	ending		
(Application Serial Number)	(Filing Date)	(STATUS: Paten	ted, Pending, Abandoned)		
08/150,643	November 10, 1	1993 Ab	andoned		
(Application Serial Number)	plication Serial Number) (Filing Date)		(STATUS: Patented, Pending, Abandoned)		
POWER OF ATTORNEY: As a name transact all business in the Patent and Transact SENIOR PATENT COUNSEL AN	ademark Office connected herewith	(List name and registration number)			
Michael N. Mercanti	Richard S. Roberts	Wyatt B. 1	Pratt		
Name	Name		Name		
33,966	27,941	40,778			
Registration Number	Registration Nu	ımber Re	egistration Number		
SEND CORRESPONDENCE TO:	Michael N. Mercanti				
	Roberts & Mercanti, L.I	L.P.			
DIRECT TELEPHONE CALLS TO:	P.O. Box 484 Princeton, New Jersey 0 Michael N. Mercanti Tel.: (609) 921-3500	8542-0484			

ar pu	I hereby declare that all the believed to be true; and furthe unishable by fine or imprisonments.	statements made herein of my own knowledge are true and that all state that these statements were made with the knowledge that willful false int, or both, under Section 1001 of Title 18 of the United States Code, as application or any patent issuing thereon.	statements and the like so made are
	INVENTOR'S SIGNATURE	- Car W. Ondor	Date
	RESIDENCE 4655 Oakl	eigh Manor Drive, Powder Springs, GA 30127	
		tates of America	
	POST OFFICE ADDRESS	4655 Oakleigh Manor Drive, Powder Springs, GA 30127	
į	FULL NAME OF SECOND JO INVENTOR'S SIGNATURE RESIDENCE 1-207 Don CITIZENSHIP Republic POST OFFICE ADDRESS	Myung-ok Park-Cho K g, A Apt., Chang-Dong, Tobong-Gu, Seoul, Korea of South Korea 1-207 Dong, A Apt., Chang-Dong, Tobong-Gu, Seoul, Korea	Date * November 11, 1999
En 1.4 L.	FULL NAME OF THIRD JOIN INVENTOR'S SIGNATURE RESIDENCE CITIZENSHIP POST OFFICE ADDRESS	NT INVENTOR	Date
The state of the s	FULL NAME OF FOURTH IC INVENTOR'S SIGNATURE RESIDENCE CITIZENSHIP POST OFFICE ADDRESS	DINT INVENTOR	Date

Date _

FULL NAME OF FIFTH JOINT INVENTOR
INVENTOR'S SIGNATURE
RESIDENCE
CITIZENSHIP
POST OFFICE ADDRESS



DECLARATION FOR PATENT APPLICATION SOLE OR JOINT

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I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention titled:

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Prior Foreign Application(s)			,
(Number)			Priority Claimed
(Number)	(Country)	(Day/Month/Year Filed)	Yes No
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(Number)	(Country)	(Day/Month/Year Filed)	Yes No
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(Application Serial Number)	(Filing Date)	(STATUS: Pater	nted, Pending, Abandoned)
POWER OF ATTORNEY: As a named transact all business in the Patent and Trade	inventor, I hereby appoint the formark Office connected herewith	llowing attorney(s) and/or agent(s) to h (List name and registration number	prosecute this application and).
(LIST SENIOR PATENT COUNSEL AND	ATTORNEY HANDLING CAS	E WITH PATENT OFFICE REGIST	RATION NUMBERS.)
Michael N. Mercanti	Richard S. Roberts	Wyatt B.	Pratt
Name	Name		Name
33,966	27,941	40,778	
Registration Number	Registration N	umber R	egistration Number
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	Roberts & Mercanti, L.	L.P.	
	P.O. Box 484 Princeton, New Jersey (08542-0484	
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	Tel.: (609) 921-3500		
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D	DECLARATION FOR PATENT A CATION—SOLE OR JOINT (Continued)	comey's Docket No.: 2131020-CI	P2 - Page 2
pυ	I hereby declare that all statements made herein of my own knowledge are true and that are believed to be true; and further that these statements were made with the knowledge that will bunishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States may jeopardize the validity of the application or any patent issuing thereon.	Iful false statements and the li	ke so made are
	FULL NAME OF SOLE OR FIRST INVENTOR Carl W. Gilbert,		
	INVENTOR'S SIGNATURE & Carl W. Gilburt	Date x 117	97
	RESIDENCE 4655 Oakleigh Manor Drive, Powder Springs, GA 30127		
	CITIZENSHIP United States of America		
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	FULL NAME OF THIRD JOINT INVENTOR INVENTOR'S SIGNATURE RESIDENCE CITIZENSHIP POST OFFICE ADDRESS	Date	
₫			
	FULL NAME OF FOURTH JOINT INVENTOR INVENTOR'S SIGNATURE RESIDENCE CITIZENSHIP	Date	
U	POST OFFICE ADDRESS		
	FULL NAME OF FIFTH JOINT INVENTOR		
	INVENTOR'S SIGNATURE RESIDENCE CITIZENSHIP	Date	
7	POST OFFICE ADDRESS		

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